

**STATE OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
BOARD OF REGISTERED NURSING MINUTES**

DATE: June 14, 2011

LOCATION: Doubletree Hotel- Ontario
222 North Vineyard Avenue
Ontario, CA 91764

PRESENT: Jeannine Graves, MPA, BSN, RN, President
Darlene Bradley, MSN, CNS, RN
Judy L. Corless, BSN, RN
Dian Harrison, MSW
Erin Niemela

NOT PRESENT: Doug Hoffner, Vice President
Richard L. Rice
Catherine M. Todero, PhD, MSN, RN
Kathrine M. Ware, MSN, ANP-C, RN

ALSO PRESENT: Louise Bailey, M.Ed., RN, Executive Officer
Stacie Berumen, Enforcement Division Chief
Christina Sprigg, Administration Manager
Carol Stanford, Diversion Program Manager
Don Chang, DCA Legal Counsel
Janette Wackerly, MBA, RN, NEC
Geri Nibbs, MN, RN, NEC
Kim Ott, Legal Desk Analyst

1.0 CALL TO ORDER

J. Graves, Board President, called the meeting to order at 1:15 pm and had the Board Members introduce themselves.

2.0 Public Comment for Items Not on the Agenda

Trisha Hunter, ANA-C

3.0 Enforcement-Regulation Proposals

Geri Nibbs presented this report

At its April 13, 2011, meeting, the Board voted to convene a meeting on June 14, 2011, to determine its responses to the public comments and any modifications to the Enforcement-Regulation Proposals. Prior to the April meeting, Board members were sent a copy of the written comments, and staff provided a written summary of the comments at the meeting. No one testified at the public hearing on the matter. Following are proposed responses to the comments, and the proposed modified regulatory language is attached.

GENERAL COMMENTS: The Board's authority to promulgate the Enforcement-Regulation Proposals was questioned and an explanation for the selection of the elements of SB1111 incorporated in the regulatory proposals was requested. **Reject.**

Proposed Response: Business and Professions Code (BPC), Section 2715 authorizes the Board to adopt, amend, or repeal rules and regulations as reasonably necessary to enable it to implement the provisions of the Nursing Practice Act. Each of the proposed regulatory actions is predicated on this authority, and the specific section of the Nursing Practice Act that is being acted on is cited in the Reference Section of each regulatory proposal. The regulatory proposals were selected from SB1111 based on the Board's determination that they would enhance implementation of the Enforcement Program and that the Board possessed the requisite statutory authority to take the proposed action.

SPECIFIC COMMENTS AND RESPONSES:

Amend Section 1403 - Delegation of Certain Functions

Delegate to the Executive Officer (EO) the authority to approve settlement agreements for the revocation, surrender, or interim suspension of a license.

Comments and Proposed Responses:

1. Require that any action pursuant to this new authority be publicly reported to the Board.
Accept.

Proposed Modification: Require that actions taken pursuant to the new delegated authority be publicly reported to the Board.

2. Current duties delegated to the EO in Section 1403 are generally limited to duties with an administrative function. The delegation of authority to approve disciplinary actions appears inconsistent with currently delegated functions. **Reject.**

Proposed Response: BPC, Section 2708 speaks to the issue of the Board delegating duties to the Executive Officer, and reads in pertinent part: "The board shall appoint an executive officer who shall perform the duties delegated by the board..." The statute does not limit the type or nature of duties that may be delegated. Thus, the Board has the authority and responsibility for determining which duties to delegate and may do so long as such action does not violate any statute and is consistent with the Board's public protection mandate.

3. Clarify in proposed regulations which types of settlement cases will be retained under the current voting process by the Board members. **Reject.**

Proposed Response: The proposed regulation clearly specifies which settlement cases the EO *is* authorized to take action on. The Board retains authority for all others; it is unnecessary to specify these settlement cases in the regulation.

4. Change the words "settlement agreement for interim suspension" to words that can be easily distinguished from the order obtained pursuant to BPC, Section 494. **Reject.**

Proposed Response: The purpose of this regulatory change is to allow the Executive Officer to adopt a stipulation for an interim suspension that is sought pursuant to Section 494 of the Business and Professions Code (all section references are to that Code). Under Section 494, a board or an administrative law judge may, upon petition, issue an interim order suspending any licensee or imposing license restrictions. While the majority of interim suspension orders (ISO) are heard before an administrative law judge, there may be situations where upon receipt of the petition, the licensee acknowledges the severe nature of the alleged violation and wishes to stipulate to an ISO rather than go through a hearing. It is this type of situation where the Board believes that it is appropriate

for its EO to adopt such a stipulation imposing an interim suspension. Such action would quicken the process for obtaining an interim suspension. A stipulation would occur only if the licensee agreed to the ISO.

5. Specify that the EO's designee may perform the delegated duties specified in Section 1403, if the EO is "not available," rather than in the EO's "absence from the office of the board." **Reject.**

Proposed Response: The comment is not responsive to the regulatory proposal.

Section 1410 – Application

Require an applicant for licensure to undergo an evaluation and/or examination if it appears the applicant may be unable to practice nursing safely due to mental and/or physical illness. The Board is required to pay for the examination.

Comments and Proposed Responses:

1. Change the language to make it consistent with the authority provided in Section 820 of the BPC, i.e., an applicant's failure to comply is grounds for denial of license. **Reject.**

Proposed Response: Section 1410 proposes that where an applicant has been ordered to undergo an evaluation, but fails to do so that his or her application would be deemed to be incomplete. An incomplete application cannot be acted upon. It would be more accurate to characterize the failure to obtain an evaluation as an incomplete application rather than a denied application.

2. Add and clarify the process to be used to require the applicant to take an examination. **Accept.**

Proposed Modification: Section 1410 could include language to provide that if the Board determines that the applicant's ability to practice nursing safely is impaired because of the applicant is mentally ill or physically ill affecting competency, the Board may deny the applicant's license application. The Board shall not grant a license to an applicant who was denied a license because it was determined that the applicant's ability to practice nursing was impaired due to mental illness or physical illness affecting competency until it has received competent evidence of the absence or control of the condition which caused its action and until it is satisfied that with due regard for the public health and safety the person's application for licensure may be safely granted.

3. Clarify and add the disciplinary options applied to applicants, e.g., license denial, conditional (probationary license), just as in BPC, Section 822, for licensees. **Reject.**

Proposed Response: The denial of a license for failure to undergo an ordered evaluation or to deny the license because the applicant is unable to practice safely is not disciplinary since the applicant does not have a license to discipline. Such a decision to deny is based upon a lack of qualifications.

Section 1441 - Unprofessional Conduct

Defines specified acts as unprofessional conduct.

Comments and Proposed Responses:

1441(a) Inclusion of “gag clauses” in civil disputes. The term “civil dispute” is unclear.
Accept.

Proposed Modification: Change to “civil action for damages.”

1441(b) Failure to provide lawfully requested copies of documents. The section does not apply to a licensee who does not have access to or control over medical records. Change “medical record” to “record.” **Accept, with modification to provide further clarity and internal consistency.**

Proposed Modification: Change “medical records” to “documents.”

1441(d)(1) and 1441(d)(2) Require licensees to report arrests and convictions. Delete the requirements based on lack of fairness, punitive, and process issues.

Proposed Modification: Delete the subsections. The Department of Justice provides subsequent arrest and conviction reports to the Board.

Section 1443.6-Required Actions Against Registered Sex Offenders

Sets forth the disciplinary action to be taken by the Board if an applicant for licensure, licensee, or petitioner for reinstatement of a revoked license is required to register as a sex offender, and specifies the circumstances in which the Section does not apply. Subsection (b)(2) exempts from the provision of this regulation an individual who is required to register as a sex offender pursuant to Section 290 of the Penal Code solely because of a misdemeanor conviction under Section 314 of the Penal Code.

Comments and Proposed Responses:

1. Delete (b)(2) and/or provide clarification for the exemption. **Reject.**

Proposed Response: PC Section 314 pertains to indecent exposure-related misdemeanor violations. The nature and circumstances of the underlying violation may be of a less egregious nature and may not warrant license revocation to protect consumers. The Board will review these cases on an individual basis, and will impose appropriate disciplinary action, including revocation, based on the specifics of the cases.

2. Introduce additional proposed regulations with absolute bars to licensure for greater preemptive and preventative public protection. **Reject.**

Proposed Response: At this time, the Board is limiting the regulatory proposal to actions against registered sex offenders.

Attachment: Proposed modified regulatory language.

**PROPOSED MODIFIED TEXT
6-14-11**

**BOARD OF REGISTERED NURSING
Specific Language of Proposed Changes**

1403. Delegation of Certain Functions.

(a) The power and discretion conferred by law upon the board to receive and file accusations; issue notices of hearing, statements to respondent and statements of issues; receive and file notices of defense; determine the time and place of hearings under Section 11508 of the Government Code; issue subpoenas and subpoenas duces tecum; set and calendar cases for hearing and perform other functions necessary to the efficient dispatch of the business of the board in connection with proceedings under the provisions of Sections 11500 through 11528 of the Government Code, prior to the hearing of such proceedings; to approve settlement agreements for the revocation, surrender or interim suspension of a license; and the certification and delivery or mailing of copies of decisions under Section 11518 of said Code are hereby delegated to and conferred upon the executive officer, or, in his/her absence from the office of the board, his/her designee.

NOTE: Authority cited: Section 2715, Business and Professions Code. Reference: Section 2708, Business and Professions Code.

(b) All settlement agreements for the revocation, surrender, or interim suspension of a license approved pursuant to section 1403(a) shall be reported at regularly scheduled board meetings.

1410. Application.

(a) An application for a license as a registered nurse by examination shall be submitted on an application form provided by the board, and filed with the board at its office in Sacramento. An application shall be accompanied by the fee and such evidence, statements or documents as therein required including evidence of eligibility to take the examination. The applicant shall submit an additional application and fee for the examination to the board or to its examination contractor, as directed by the board. ~~The Bboard~~ shall provide the contractor's application to the applicant. No license shall be issued without a complete transcript on file indicating successful completion of the courses prescribed by the board for licensure or documentation deemed equivalent by the Bboard.

(b) An application for a license as a registered nurse without examination under the provisions of Section 2732.1 (b) of the code shall be submitted on an application form prescribed and provided by the board, accompanied by the appropriate fee and by such evidence, statements, or documents as therein required, and filed with the board at its office in Sacramento.

(c) The applicant shall be notified in writing of the results of the evaluation of his/her application for license if the application is rejected.

(d) In addition to any other requirements for licensure, whenever it appears that an applicant for a license may be unable to practice nursing safely because the applicant's ability to practice may be impaired due to mental illness, or physical illness affecting competency, the board may require the applicant to be examined by one or more physicians and surgeons or psychologists designated by the board. The board shall pay the full cost of such examination. An applicant's failure to comply with the requirement shall render his or her application incomplete.

The report of the evaluation shall be made available to the applicant.

(e) The Board shall not grant a license to an applicant who was denied a license because it was determined that the applicant's ability to practice nursing was impaired due to mental illness or physical illness affecting competency until it has received competent evidence of the absence or control of the condition which caused its action and until it is satisfied that with due regard for the public health and safety the person's application for licensure may be safely granted.

NOTE: Authority cited: Section 2715, Business and Professions Code. Reference: Sections 480, 820, 2729, 2732.1, 2733, 2736, 2736.5, 2736.6, 2737 and 2815, Business and Professions Code.

1441. Unprofessional Conduct.

In addition to the conduct described in Section 2761 (a) of the Code, "unprofessional conduct" also includes, but is not limited to, the following:

(a) Including or permitting to be included any of the following provisions in an agreement to settle a civil dispute action for damages arising from the licensee's practice, whether the agreement is made before or after the filing of an action:

(1) A provision that prohibits another party to the dispute from contacting, cooperating, or filing a complaint with the board.

(2) A provision that requires another party to the dispute to attempt to withdraw a complaint the party has filed with the board.

(b) Failure to provide to the board, as directed, lawfully requested copies of documents within 15 days of receipt of the request or within the time specified in the request, whichever is later, unless the licensee is unable to provide the documents within this time period for good cause, including but not limited to, physical inability to access the records in the time allowed due to illness or travel. This subsection shall not apply to a licensee who does not have access to, and control over, medical records the documents.

(c) Failure to cooperate and participate in any board investigation pending against the licensee. This subsection shall not be construed to deprive a licensee of any privilege guaranteed by the Fifth Amendment to the Constitution of the United States, or any other constitutional or statutory privileges. This subsection shall not be construed to require a licensee to cooperate with a request that would require the licensee to waive any constitutional or statutory privilege or to comply with a request for information or other matters within an unreasonable period of time in light of the time constraints of the licensee's practice. Any exercise by a licensee of any constitutional or statutory privilege shall not be used against the licensee in a regulatory or disciplinary proceeding against the licensee.

(d) Failure to report to the board, within 30 days, any of the following:

~~(1) The bringing of an indictment or information charging a felony against the licensee.~~

~~(2) The arrest of the licensee.~~

~~(3) (1) The conviction of the licensee, including any verdict of guilty, or pleas of guilty or no contest, of any felony or misdemeanor.~~

~~(4) (2) Any disciplinary action taken by another licensing entity or authority of this state or of another state or an agency of the federal government or the United States military.~~

(e) Failure or refusal to comply with a court order, issued in the enforcement of a subpoena, mandating the release of records to the board.

NOTE: Authority cited: Section 2715, Business and Professions Code. Reference: Sections 2761 and 2765, Business and Professions Code.

1443.6. Required Actions Against Registered Sex Offenders.

(a) Except as otherwise provided, if an individual is required to register as a sex offender pursuant to Section 290 of the Penal Code, or the equivalent in another state or territory, or military or federal law, the board shall:

(1) Deny an application by the individual for licensure, in accordance with the procedures set forth in Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code.

(2) Promptly revoke the license of the individual, in accordance with the procedures set forth in Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and shall not stay the revocation nor place the license on probation.

(3) Deny any petition to reinstate or reissue the individual's license.

(b) This section shall not apply to any of the following:

(1) An individual who has been relieved under Section 290.5 of the Penal Code of his or her duty to register as a sex offender, or whose duty to register has otherwise been formally terminated under California law or the law of the jurisdiction that required registration.

(2) An individual who is required to register as a sex offender pursuant to Section 290 of the Penal Code solely because of a misdemeanor conviction under Section 314 of the Penal Code; provided, however, that nothing in this paragraph shall prohibit the board from exercising its discretion to discipline a licensee under any other provision of state law based upon the licensee's conviction under Section 314 of the Penal Code.

(3) Any administrative proceeding that is fully adjudicated prior to the effective date of this regulation. A petition for reinstatement of a revoked or surrendered license shall be considered a new proceeding for purposes of this paragraph, and the prohibition in subsection (a) against reinstating a license shall govern.

NOTE: Authority cited: Section 2715, Business and Professions Code. Reference: Sections 480, 2736, 2750, 2759, and 2760.1, Business and Professions Code; and Section 11425.50, Government Code.

1444.5. Disciplinary Guidelines.

In reaching a decision on a disciplinary action under the Administrative Procedure Act (Government Code Section 11400 et seq.), the Board shall consider the disciplinary guidelines entitled: "Recommended Guidelines for Disciplinary Orders and Conditions of Probation" (10/02), which are hereby incorporated by reference. Deviation from these guidelines and orders, including the standard terms of probation, is appropriate where the board, in its sole discretion, determines that the facts of the particular case warrant such a deviation -for example, the presence of mitigating factors; the age of the case; evidentiary problems.

Notwithstanding the disciplinary guidelines, any proposed decision issued in accordance with the procedures set forth in Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code that contains any finding of fact that the licensee engaged in any acts of sexual contact, as defined in subdivision (c) of Section 729 of the Code, with a patient, or has committed an act or been convicted of a sex offense as defined in Section 44010 of the Education Code, shall contain an order revoking the license. The proposed decision shall not contain an order staying the revocation of the license.

NOTE: Authority cited: Section 2715, Business and Professions Code; and Section 11400.20, Government Code. Reference: Sections 726, 729, 2750, 2759, 2761 and 2762, Business and Professions Code; Section 44010, Education Code; and Sections ~~11400.20 and~~ 11425.50(e), Government Code.

- California Code of Regulations, Article 1, Section 1403, Delegation of Certain Functions

No public comment.

MSC: Niemela/Harrison that the Board accept the proposed responses and modification of Section 1403. 5/0/0

➤ California Code of Regulations, Article 2, Section 1410, Application
Discussion included potential issues with American with Disabilities Act; lack of information on the process for implementation of the proposed regulation; and vagueness of the phrase “whenever it appears that the applicant for a license may be unable...”

Public comment:

Kelly Green, CNA
Trisha Hunter, ANA-C
Jeannie King, SEIU Nurse Alliance of California

MSC: Niemela/Harrison that the Board rescind Section 1410. 5/0/0

➤ California Code of Regulations, Article 4, Section 1441, Unprofessional Conduct
Discussion included fact that a registered nurse, although a named party in a civil dispute, may not have authority to prevent inclusion of a gag clause in the settlement agreement.

Public comment:

Trisha Hunter, ANA-C
Kelly Green, CNA
Grace Corse, SEIU Nurse Alliance
Barbara Blake, UNA

MSC: Harrison/Corless that the Board rescind subsection (a); and accept the proposed responses and modifications of subsection (b), (d)(1), and (d)(2). 5/0/0

➤ California Code of Regulations, Article 4, Section 1443.6, Required Actions Against Registered Sex Offenders
The Board’s position is that in the majority (99% to 100%) of such cases, the appropriate disciplinary action is denial or revocation of the license. Its position is reflected in the disciplinary action it has imposed in such cases as well as by proposed Section 1445.5, Disciplinary Guidelines, of this regulatory proposal, which requires administrative law judges to include an order revoking the license if the licensee is required to register as a sex offender. However, the Board should not relinquish its discretionary authority in such matters via the regulatory process.

Public comment:

Kelly Green, CNA

MSC: Harrison/Bradley that the Board rescind Section 1443.6. 5/0/0

➤ California Code of Regulations, Article 4, Section 1444.5, Disciplinary Guidelines
No public comment.

MSC: Niemela/Graves that the Board continue to approve and adopt Section 1444.5. 5/0/0

No public comment.

Meeting adjourned at 3:10 pm.

4.0 Closed Session

J. Graves, Board President, called the closed session meeting to order at 3:39 pm. The closed session adjourned at 5:52 pm.

Disciplinary Matters

The Board will convene in **closed session** pursuant to Government Code Section 11126(c) (3) to deliberate on disciplinary matters including stipulations and proposed decisions.

Discussion of Pending Litigation

The Board will meet in closed session to discuss a pending litigation matter with its legal counsel pursuant to Government Code Section 11126(e) (2) (C) (i), and 11126(e) (2) (B) (i).

Wednesday, June 15, 2011 – 9:00 am

PRESENT:

Jeannine Graves, MPA, BSN, RN, President
Darlene Bradley, MSN, CNS, RN (7/15 left at 5:30pm)
Judy L. Corless, BSN, RN
Dian Harrison, MSW
Erin Niemela
Catherine M. Toderro, PhD, MSN, RN
Kathrine M. Ware, MSN, ANP-C, RN

NOT PRESENT:

Doug Hoffner, Vice President
Richard L. Rice

ALSO PRESENT:

Louise Bailey, M.Ed., RN, Executive Officer
Don Chang, Legal Counsel
Stacie Berumen, Enforcement Division Chief
Christina Sprigg, Administration Manager
Carol Stanford, Diversion Program Manager
Janette Wackerly, MBA, RN, NEC
Miyo Minato, MN, RN, NEC
Leslie Moody, MEd, MSN, RN, NEC
Kay Weinkam, MSN, RN, NEC
Kim Ott, Legal Desk Analyst

5.0 CALL TO ORDER

J. Graves, Board President, called the meeting to order at 9:08 am and had the Board Members introduce themselves.

6.0 Public Comment for Items Not on the Agenda

Trisha Hunter, ANA-C
Genevieve Clavreul, RN

7.0 Review and Approve Minutes:

➤ April 13, 2011, Board Meeting

MSC: Corless/Niemela that the Board approve minutes from April 13, 2011. 7/0/0

8.0 Report on Board Members' Activities

Kathrine M. Ware attended the Advanced Practice Registered Nurse Summit in San Pedro on April 30, 2011.

9.0 Board and Department Activities

9.1 Executive Officer Report

Louise Bailey presented this report

New Agency Undersecretary Appointed

Dr. Willie J. Armstrong was appointed as the Undersecretary for the State and Consumer Services Agency. He serves as principal advisor to the Secretary on major policy, program, legislation and fiscal matters. Additionally, he is responsible for all functions in the Office of the Secretary and discharges all statutory functions of the Secretary to the departments of the Agency.

Dr. Armstrong has provided 18 years of public service to his country and to the State of California. He served a decade in the United States Air Force. During his tenure, he worked with Army and Air Force agencies to ensure strict adherence with Department of Defense (DoD) fraud, waste, and abuse guidelines. Dr. Armstrong has advised members of the California State Assembly for eight years. As Chief-of-Staff, he discussed the impact of state budget and legislative proposals that affect the ability of local and state agencies to deliver services to the people of California.

He earned his bachelor's degree in Management Studies and Master's degree in Public Administration from the University System of Maryland-European Division. He earned his Doctorate in Educational Leadership and Policy (Ed.D.) from California State University-Sacramento.

Board's Budget Update

May Revise – As of this date the Governor's Revised Budget is not available.

Current Year AG Budget

The Boards request to augment the Attorney General line by \$2.6 million and the Office of Administrative Hearings line by \$288,000 was approved on May 4, 2011 for \$2.278 million.

Revenue

Current year revenue is much lower than was originally projected on our Workload and Revenue. Exam applications are down 5,096 or 26.8% over same time last year and 7,871 or 36% over 2008/09. Renewals are also projected to be at least 3,000 lower than last year. If this pattern continues next fiscal year, the general fund loan of \$15 million will leave the boards reserve at .8 months negative. DCAs budget office has been advised so that they can in turn advise Dept of Finance. Existing law prohibits the transfer of funds if the transfer will interfere with the object for which a special fund was created.

Department of Consumer Affairs (DCA) Updates

Sandra Mayorga has accepted the position as DCA Personnel Officer. Sandra is working to provide improved client service to all DCA staff when working with the Office of Human Resources. Sandra brings an extensive Personnel Management background expanding over 20 years in HR, 14 of which were here at DCA in various capacities. She served as an Associate Personnel Analyst in the Personnel Office, Client Service Team, Staff Services Manager, Division of Investigation, Assistant Personnel Officer, the Personnel Officer and most recently the HR, Chief at the Department of Insurance.

Kimberly Kirchmeyer Deputy Director for Board / Bureau Relations has accepted the Medical Board's offer to re-join their executive team as Deputy Director effective June 2, 2011. Kim has been a valuable member of the executive team since her appointment by the former Governor in November 2009. Kim has been instrumental and has played a key role for many of the achievements we have gained over the past 18 months.

Kim's vast knowledge and experience in program matters helped all 37 boards, bureaus, and programs improve their daily operations, policy making, and overall board governance. Kim's professionalism, work ethic, and integrity are unmatched and worthy of emulation. Additionally, since January, Kim willingly assumed the added duties of Acting Chief Deputy in addition to her incredibly heavy workload.

BRN Office Relocation Update

The DCA has split the move to HQ2 into two phases. The BRN is scheduled to move in the first phase with a tentative move date of August 5, 2011. The remaining tenants will move sometime in October 2011. DCA Facilities Management Unit continues to work with board staff to finalize the details of the move. The building interior is currently under construction and is anticipated to be completed by mid July 2011. All purchase orders and work contracts have been submitted and are in process by DCA. The modular furniture order has been placed as well as the mobile file room shelving units for the enforcement file room.

Staff is currently in the process of identifying what is to be moved and what is to be surveyed. Additionally, over the next month and a half staff will be working to clean out and organize shared areas within the office as well as their own work cubicles.

It is anticipated that the BRN office will be closed to the public on Friday, August 5th the day of the move and Monday, August 8th the first work day after the move to allow staff to set up the office to be ready for public business on Tuesday, August 9th. Notification of the office being closed will be posted on the Board's website and added to the Board's telephone message July 1, 2011.

Board Member Orientation

In accordance with Business and Professions Code Section 453, Board Members are required to attend DCA's Board Member Orientation within one year of their appointment. The next Board Member Orientation is set for October 12, 2011 at DCA Headquarters in Sacramento from 9:00 am to 4:30 pm. Please notify the Administration Unit if you would like to attend either of the orientations.

Hiring Freeze Exemptions

The BRN was approved for two hiring freeze exemptions for the Associate Governmental Program Analyst (AGPA) classification for the Enforcement program. One AGPA

approved in the Complaint Intake Unit and one AGPA approved in the Discipline Unit. The third exemption for an Enforcement support Office Technician was denied. The Board will continue to submit exemption requests for vacancies throughout the board.

Travel Restrictions Executive Order B-6-11

On April 26, 2011 the Governor's Office issued Executive Order B-6-11 regarding discretionary travel. The Executive Order stated that all discretionary travel is prohibited. All in-state non-discretionary travel must be approved by Agency Secretaries or Department Directors who do not report to an Agency Secretary. All out-of-state travel must be approved by the Governor's Office.

- No travel, either in-state or out-of-state, is permitted unless it is mission critical or there is no cost to the state. Mission critical means travel that is directly related to:
 - Enforcement responsibilities.
 - Auditing.
 - Revenue collection.
 - A function required by statute, contract or executive directive.
 - Job-required training necessary to maintain licensure or similar standards required for holding a position.
- Mission critical does not mean travel to attend:
 - Conferences (even those that historically have been attended).
 - Networking opportunities.
 - Professional development courses.
 - Continuing education classes and seminars.
 - Non-essential meetings that can be conducted by phone or video conference.
 - Events for the sole purpose of making a presentation unless approved by the Department Director.
- No travel is permitted for more than the minimum number of travelers necessary to accomplish the mission-critical objective. This restriction applies even when there is no cost to the state.
- Agency Secretaries or Department Directors who do not report to an Agency Secretary may authorize in-state travel when the request conforms to the principles identified above.
- The Department of Finance will issue all necessary instructions and forms to implement this restriction on state travel.

Education Issues Workgroup (formerly Education Advisory Committee)

The Education Issues Workgroup met on April 27, 2011 in Sacramento. The focus of the meeting was to review the 2009-2010 Annual School Survey instrument and make edits as needed for the 2010-2011 survey document. The workgroup includes nursing directors from various nursing program types including public and private programs, community colleges, CSU and UC. Representatives from some other nursing related agencies (i.e. Community College Chancellor's office, CINHC, etc.) are also members. The survey is being drafted and will be available for nursing programs to complete online from October 3rd through November 15, 2011.

Public Record Request

The BRN continues to comply with public record requests and responds within the required timeframes that are set in Government Code Section 6250. For the period of April 1, 2011 through June 1, 2011, the Board has received and processed 47 public record requests.

DCA has received a Public Records Act request for various boards and bureaus from Brian Joseph from the Orange County Register. He is requesting a list of the various ways the boards may designate a closed complaint file (i.e. closed, closed with merit, etc.) as well as a definition of each designation. Additionally, he is requesting the number of records of complaints closed with merit by each board for the past five years (2006-2010), and for the number of complaints closed with merit in the current year for certain boards only.

Board Member Correspondence

For the period of April 1, 2011 through June 1, 2011, the BRN received no letters addressed to Board Member(s).

Personnel

The following personnel changes have transpired since the last Board Meeting:

New Hires	Classification	Board Program
Abby Boxwell	Office Technician	Administration
Promotion	Classification	Board Program
Nancy Van Vooren	Associate Government Program Analyst	Advanced Practice
Shannon Silberling	Associate Government Program Analyst	Probation Monitor
Elizabeth Elias	Associate Government Program Analyst	Probation Monitor
Lisa Hall	Associate Governmental Program Analyst	Probation Monitor
Rico Stephan	Special Investigator	Investigations
Wendy Garske	Special Investigator	Investigations
Janette Wackerly	Supervising Nursing Education Consultant	Northern California
Miyo Minato	Supervising Nursing Education Consultant	Southern California
Stacie Berumen	Staff Services Manager III	Enforcement

Limited Term Returnee's	Classification	Board Program
Pete Marquez	Associate Governmental Program Analyst	Complaint Intake Unit
Lisa Lopez	Associate Governmental Program Analyst	Discipline Unit

Separations	Classification	Board Program
Helen Park	Office Technician	Decisions & Appeals

Public comment:
Genevieve Clavreul, RN

9.2 DCA Director's Report

Brian Stiger, DCA Acting Director, presented this report

Executive office is going through transition period due to personnel changes. General overview providing additional information onto Executive Officer's report in regards to the Secretary and Undersecretary was provided. Former Deputy Director, Kimberly Kirchmeyer, went to Medical Board. Kim will work half time for remainder of June to assist Brian.

Funding for State and Consumer Agencies will now be funded by all departments, not just the General fund.

Hiring Freeze: Since Feb. have had 88% success rate with approval.

Travel Restriction:

Governor imposed executive orders designed to reduce cost plan. Once budget is signed, all departments will receive a targeted savings amount. The Department/Boards will receive relief from executive order if target is met.

Encourage Board Members to watch performance measures on website for Enforcement improvements.

DOI: No investigations over a year old.

Approval has been provided to hire special investigators in the Board of Registered Nursing.

SB 1441: Standards that Executive Officer's have put in place to monitor substance abuse and health care practitioners. The Board has a regulatory hearing scheduled later in the day, looking forward to those standards being approved.

BREEZE Project: Still moving forward in negotiations with selected vendor. Contract is projected to be in place by August.

Executive officers: Requests from board to increase salary. DCA hired an outside vendor to evaluate the possibility of salary increase for EO's and performance annually. Board performance evaluations are confidential and a part of the personnel file. Items that are departmental only are: budget information submitted timely, and complete day to day functions that involve the department.

Feedback on the EO and data collected are from a combination of the deputy director and director. The director will provide information to Board Members regarding criteria. Evaluations are on the "Survey Monkey" secure site tool. This tool is completely up to the Board if used. Accessing "Survey Monkey" and retrieving data from this tool is by whomever the Board designates. A Salary report plan should be produced by the end of August.

Public Record Requests: Department clearly defined 'closed with Merit' PRA's.

Public comment:

Trisha Hunter, ANA-C

10.0 Report of the Administrative Committee

Jeannine Graves, MPA, BSN, RN Chairperson

10.1 2011 Forecasting Report of RN's in California

Dr. Joanne Spetz from University of California, San Francisco presented this report

Public comment:

Genevieve Clavreul, RN

11.0 Report of the Legislative Committee

Erin Niemela presented report on behalf of Richard Rice, Chairperson

11.1 Adopt/Modify Positions on Bills of Interest to the Board and any other Bills of Interest to the Board introduced during the 2011-2012 Legislative Session.

Louise Bailey presented this report

AB 661 Block: Public postsecondary education: community college districts: baccalaureate degree pilot program

Erin Niemela gave notice that the Board has a watch position on AB661. No motion made.

AB 888 Pan: Pupil health: School Medication Authorization Task Force

MSC: Ware/Harrison that the Board continue to watch. Louise Bailey to contact Author to express the Board's concerns. 7/0/0

SB161 Huff: Schools: Emergency Medical Assistance: administration of epilepsy medication

Erin Niemela gave notice that the Board continues to oppose Bill SB161. No motion made.

SB 538 Price: Nursing (Sunset Bill)

MSC: Ware/Corless that the Board change from support to sponsor SB 538. 7/0/0

SB 541 Price: Regulatory boards: expert consultants

MSC: Harrison/Graves that the Board support SB 541. 6/0/0

SB 544 Price: Professions and vocations: regulatory boards

MSC: Ware/Graves that the Board move to watch SB 544. 6/0/0

Public comment:

Barbara Blake, UNA

Trisha Hunter, ANA-C

SB 747 Kehoe: Continuing Education: Lesbian, gay, bisexual, and transgender patients

Erin Niemela gave notice that the Board continues to oppose position of SB 747. No motion made.

Public comment:

Trisha Hunter, ANA-C

Brian Stiger, DCA Acting Director

SB 393 Hernandez: Medical homes

The Board has requested that SB 393 to be added back onto the Committee Agenda for the next discussion. No motion made.

12.0 Report of the Diversion/Discipline Committee

Dian Harrison, MSW, Chairperson

12.1 Nursys Discipline Data Comparison (Scrub) Update

Stacie Berumen presented this report

The Probation Program continues to work on the Nursys discipline data comparison project and will continue to do so until all records have been reconciled against California's records.

Currently, 1,805 records have been reviewed on the active license list. Determination was made whether the cases warranted a request for the other state's discipline documents. This review resulted in 1,050 requests for out-of-state documents. The documents will be evaluated and a decision made as to the appropriate action needed.

Review of the inactive license spreadsheet is in progress and will continue until complete. Holds have been placed on 1,915 inactive records to alert staff when a nurse on the list attempts to activate their license. This alert will allow staff to immediately request and review the records to determine if out-of-state discipline documents are needed for possible action on the license.

The Probation Program Manager plans to complete the requests for document reviews by July 1, 2011.

The status of the documents reviewed:

Referred to the Attorney General	309
Pleadings Received	275
Notices of Defense Received	162
Referred to Cite and Fine	38
Closed Without Action (Action taken by CA (prior to 2000) but not reported to Nursys or information approved at time of licensure)	529
Pending Hearing	50
Settlement or Decision Pending	16
Surrender or Revocation	87
Probation or Reprimand	15

UPDATE:

The contract language was reviewed DCA legal counsel, the Executive Officer, and the Enforcement Division Chief. The language is now being incorporated into the Board's existing contract with NCSBN. Once the contract has been approved by all parties at the Board, DCA information technology staff will begin the process to send all of our licensing data to NCSBN.

AG COSTS:

As of March 31, 2011, the BRN as expended \$527,582.50 at the AG's office on the Nursys Scrub cases.

No public comment.

12.2 Internet Disclosure Policy – Board Approved
Stacie Berumen presented this report

The Board of Registered Nursing (BRN) began posting discipline information on its web site in 2006. This was done in accordance with the California Public Records Act (Chapter 3.5 (commencing with Section 6250) of Division 7 of Title 1 of the Government Code). The BRN provides this information to better inform and protect California's health care consumers.

BRN provides information on the internet to indicate any disciplinary actions and their status through a series of codes from our legacy computer system. The discipline documents are added to support and explain actions taken.

In the last year, BRN staff has received requests to remove discipline documents from our website for a variety of reasons such as: it has been many years since the action was taken, the conviction included in the disciplinary action has been dismissed, expunged, or sealed, it hampers a licensee's ability to find employment, or the licensee is harassed by co-workers.

Enforcement staff has asked the committee and board members for a policy regarding discipline record retention on the internet.

FULL BOARD RECOMMENDATION ON SEPTEMBER 24, 2010:

Issue returned to the Diversion/Discipline Committee to create a policy for discipline record retention on the internet.

SUB-COMMITTEE RECOMMENDATION ON NOVEMBER 16, 2010:

Outside materials were not provided at the sub-committee meeting and held for next Diversion/Discipline Committee meeting for review and discussion.

COMMITTEE RECOMMENDATION ON JANUARY 5, 2011:

Provide the document prepared by DCA Supervising Legal Counsel, Don Chang, on December 30, 2010, to the full board for consideration and review at the January meeting.

FULL BOARD RECOMMENDATION ON FEBRUARY 2, 2011:

The board members requested staff prepare a series of options for consideration after reviewed and approved by DDC at their next meeting in March 2011.

FULL BOARD RECOMMENDATION ON APRIL 13, 2011:

The board members adopted a policy for record retention which is attached.

COMMITTEE RECOMMENDATION ON MAY 18, 2011:

Begin full enforcement of policy beginning on January 1, 2012, or sooner if staff resources are available.

QUESTION FOR BOARD:

The Medical Board enforced their statutory requirement to remove documents from the web beginning on a certain date.

No public comment.

12.3 Probation Program Update and Statistics
Stacie Berumen presented this report

Staff

The probation program has a vacant limited term Office Technician position and completed recruitment efforts to fill this position. With the limitations of only being allowed to hire DCA lateral transfer candidates, we did not receive any eligible candidates. The position has just over 16 months remaining of the 24 months allowed.

The Probation Manager and Enforcement Chief interviewed for a vacant probation monitor position and await clearance from DCAs Human Resources unit. Additional information will be provided if available.

Program

The Probation Program continues to work on the Nursys discipline data comparison project and will continue to do so until all records have been reconciled against California's records. Updates will be provided at each DDC meeting.

The Probation Program is assisting the Legal Affairs Division with the review and update of the Recommended Guidelines for Disciplinary Orders and Conditions of

Probation. They were last revised in 2002 and are long overdue for cleanup and to incorporate recent legislative and regulatory changes.

Statistics

Below are the statistics for the Probation program from as of June 2, 2011.

Probation Data	Numbers	% of Total
Male	130	25%
Female	389	75%
Chemical Dependency	297	56%
Practice Case	171	32%
Mental Health	4	<1%
Conviction	59	11%
Advanced Certificates	50	9%
Probation Data	Numbers	% of Total
Southern California	282	53%
Northern California	246	47%
Pending at the AG	72	14%
License Revoked	1	1%
License Surrendered	4	<1%
Terminated	0	0%
Completed	7	3%
Total in-state probationers	528	

12.4 Enforcement Program Update and Statistics

Stacie Berumen presented this report

PROGRAM UPDATE

Staff

In response to Executive Order, B-3-11 ordering a hiring freeze, we submitted three individual exemption requests for our limited term staff members near the end of March 2011. On May 24 and 25, 2011, we learned that two of our three requests were approved by the Department of Finance (DOF). One of our limited term employees, Pete Marquez, returned to the Board on June 6, 2011, and will begin training in our new Complaint Intake Unit. It is hoped a request will be submitted for nurses prior to this committee meeting and an update can be provided. However, we continue to wait for the DOF to determine if DCA has already reached their required budget reductions so that our department, as a whole, would be exempt from the hiring restrictions. BRN has been charged with extremely strict case completion time frames yet we continue to lack the ability to fill the necessary, approved positions, or to backfill our existing vacancies.

All three limited term staff members have either been returned to their previous agency or left state service as of May 10, 2011, leaving the Enforcement unit only 13.5 staff members, plus the program manager.

With the hiring limitations imposed by the Governor's hiring freeze we advertised and the Enforcement Chief, Stacie Berumen, Enforcement Program Manager, Kathy Hodge, and retired annuitant Special Investigator, Joan Loftin conducted interviews in March and April 2011 for our special investigator positions in northern California. We interviewed lateral transfer candidates within the Department of Consumer Affairs and those who are eligible on the new open list. Our first three candidates have cleared their employment background investigation with the Division of Investigation and there are two more candidates undergoing their background investigations. As soon as all of our candidates have been cleared they will begin outside investigation training and internal training with our retired annuitant special investigators.

We have advertised for the Staff Services Manager III position and our Executive Officer, Louise Bailey, conducted interviews near the end of May 2011 so we can move forward with our new units and processes. As soon as that process is completed we will fill our next level of managers.

Program

Approximately 850 license renewal holds have been placed on licensees for license expiration in March and April 2011, who have not complied with the retroactive fingerprint requirements and the BRN has no proof of submission. The Administration Unit worked with the Department of Justice (DOJ) to compare our list of licensees who do not have a fingerprint result to their database in late April 2011. DOJ retransmitted fingerprint results it was able to locate and retrieve for BRN licensees during the week of May 9th. Staff continues to reconcile the results but we will send out letters to licensees in an effort to resolve the renewal holds before the licensee renews the license as time and resources permit.

The Department of Consumer Affairs budget office notified the legislature that the BRN would exceed its spending authority for the Attorney General's budget line item in early April 2011. The CPEI BCP included language which allows the BRN to ensure continuous funding for the AG's office so there will not be any "slow down" or "work stoppage" prior to the end of the current fiscal year. However, the BRN is projected to exceed our budgeted line item by 84% by the end of June 30, 2011. The Enforcement Chief prepared and submitted a BCP Concept Paper on May 6, 2011, requesting augmentation to the AG, OAH, and Evidence/Expert Witness Expense line items in order to maintain the level of workload being generated and ensure consumer protection is administered as quickly as possible.

Another BCP Concept Paper was prepared and submitted by the Enforcement Chief to request the additional positions which were not approved in fiscal year 2010/11 as requested by BRN. The BCP Concept Papers are for fiscal year 2012/2013.

The BRN Enforcement and Probation programs began preparing and serving default decisions coming out of the Oakland and San Francisco AG's offices as of December 25, 2010. Evaluation of the pilot project has been extremely limited as Enforcement has only received a few qualifying default cases since the pilot began. Staff has worked with Don Chang to define necessary documents to be included in the evidentiary packets and a process is in place for legal review and approval of all defaults prepared by both units. Due to the small number of defaults prepared during the pilot program we cannot make a determination whether it is appropriate to return all defaults to the BRN. We continue to prepare default decisions to give us an opportunity to collect more data to support the BRN resuming the responsibility of preparing defaults from all AG offices.

BRN Investigations

We only have two retired annuitant investigators actively working our cases in Northern California. The Department of Personnel Administration approved the use of the Special Investigator classification for the BRN in January 2011. All complaints determined to need formal investigation and prioritized as high or urgent are referred to the DOI regardless of whether the complaints meet the DOI case investigation criteria. Only routine case investigations continue to be held for BRN investigation.

We continue to refer our oldest cases back to DOI for investigation until our special investigators have gone through specialized training and are prepared to begin conducting investigations.

Statistics

There are 726 DOI investigations and 450 BRN investigations pending completion. There are 1,164 cases pending at the AG's office which continues to remain at a very high level. The BRN continues to be the AGO's biggest client, surpassing the Contractor's State Licensing Board.

From July 1, 2010 to May 9, 2011, enforcement served 569 accusations.

Please review the enforcement statistics reports (attachment) which have additional breakdowns of information.

Board of Registered Nursing
Enforcement Division Statistics
FY 2010/2011

Complaint Intake	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	FY 2010/11
Complaints Received	1,000	646	442		2,088
Closed Without Investigation	116	136	118		370
Assigned for Investigation	826	603	302		1,731
Avg Days to Close or Assign	14	20	24		19
Pending Complaints	192	98	119		119
Conviction/Arrest Reports Received	1,182	1,338	1,089		3,609
Closed/Assigned for Investigation	1,185	1,440	1,084		3,709
Avg Days to Close or Assign	17	19	16		18
Pending Court/Arrest Complaints	235	133	138		138
Total Complaints Received	2,182	1,984	1,531		5,697
Total Closed Without Investigation Assignment	125	141	122		388
Total Assigned for Investigation	2,002	2,038	1,382		5,422
Avg Days to Close or Assign	16	19	18		18
Total Pending Complaints	427	231	257		257

Investigations	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	FY 2010/11
Desk Investigations Assigned	1,999	2,042	1,381		5,422
Desk Investigations Closed	1,740	1,755	1,596		5,091
Avg Days to Close Desk Investigations	88	84	97		90
Pending Desk Investigations	2,424	2,528	1,988		1,988
Non-Sworn Field Investigations Assigned	12	8	12		32
Non-Sworn Field Investigations Closed	12	19	17		48
Avg Days to Close Non-Sworn Field Investigations	377	458	415		442
Pending Non-Sworn Field Investigations	46	35	29		29
Unassigned Non-Sworn Field Investigations					0
Sworn Field Investigations Assigned	79	168	312		559
Sworn Field Investigations Closed	261	159	141		561
Avg Days to Close Sworn Field Investigations	650	523	498		580
Pending Sworn Field Investigations	486	493	669		669
All Investigations First Assigned	2,000	2,046	1,385		5,431
All Investigations Closed	2,013	1,933	1,754		5,700
Avg Days to Close All Investigations	161	121	130		141
Pending All Investigations	2,956	3,059	2,686		2,686
Closed Without Referral to Discipline	1,471	1,582	1,467		4,520
Avg Days to Close Without Referral to Discipline	121	98	113		112
Investigations Aging	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	FY 2010/11
0-90 Days	1,262	1,214	1,047		3,523
91-180 Days	263	352	334		949
181 Days - 1 Year	175	190	188		553
1-2 Years	221	128	149		498
2-3 Years	67	46	27		140
Over 3 Years	25	3	9		37

Citations	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	FY 2010/11
Final Citations	38	22	12		72
Avg Days to Complete Citations	184	198	214		193

Board of Registered Nursing
Enforcement Division Statistics
FY 2010/2011

Disciplinary Cases	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	FY 2010/11
AG Cases Initiated	434	284	236		954
AG Cases Pending	1,115	1,196	1,201		1,201
Statements of Issue Filed	3	9	18		30
SOI Proposed/Default Decisions	0	0	1		1
SOI Stipulated Decisions	0	2	0		2
SOI Final Orders (Adopted by Board)	0	2	1		3
SOI Avg Days to Complete	0	401	292		364
Accusations Filed	273	302	209		784
Accusations - Proposed/Default Decisions	58	60	93		211
Accusations - Stipulated Decisions	71	102	106		279
Accusations - Final Orders (Adopted by Board)	129	162	199		490
Accusations - All Decisions Avg Days to Complete	908	798	766		776
Total Final Orders (Adopted by Board)	129	164	200		493
Total Avg Days to Complete	908	798	766		773
Accusations Withdrawn	7	10	7		24
Accusations Dismissed	2	0	2		4
Accusations Declined	5	16	11		32
Avg Days to Complete Accusations W/D, Dis, Dec	829	549	650		730
Cases Closed Without Disciplinary Action	11	11	7		29
Avg Days to Complete Cases Closed W/O Discipline	335	478	193		405
Total Orders Aging	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	FY 2010/11
0-90 Days	0	0	0		0
91-180 Days	3	5	8		16
181 Days - 1 Year	21	28	70		119
1-2 Years	28	52	55		135
2-3 Years	34	36	30		100
Over 3 Years	43	43	37		123

2

Public comment:
 Brian Stiger, DCA Acting Director
 Inga Aldred, NA
12.5 Diversion Program Update and Statistics
 Carol Stanford presented this report

Program Update

The diversion program manager, Carol Stanford, Maximus program director, Virginia Matthews and a DEC member who was previously a successful Diversion Program participant presented a Diversion Program Education Seminar on April 18th to more than 60 Human Resource Executives, Directors, and Chief Nursing Officers in southern California. The presentation outlined the history of the California Diversion Program and explained the purpose and responsibilities of different components of the program. Copies of the presentation are available upon request. The seminar was well received with a request that the same seminar be presented in northern California.

One of the case managers who testified at a hearing was invited by the administrative law judge to present information about the Diversion Program to her colleagues, Attorney Generals and district attorneys. Information regarding this presentation will be forthcoming at a later date. Another case manager presented information on the Diversion Program at UC Davis Medical Center. Several of the evaluations indicated the presentation was excellent and more hospitals need to hear about the program.

Contractor Update

BRN diversion program staff, other diversion program managers, and DCA legal staff have been meeting with Maximus to outline any minor contract changes needed to conform to the requirements outlined in SB1441 and SB 1172.

A review of the relapse rates outlined in our quarterly report shows four consecutive quarters of a decrease in the amount of relapses that are occurring. We will continue to monitor these outcomes to determine if a trend is emerging.

On May 4, 2011, Maximus achieved “recommendation for registration” after completing the International Organization for Standardization (ISO) audit. The Maximus Diversion Program is the only program in the nation who has achieved this status. Virginia Matthews, Maximus Program Director, will present a brief report on this achievement and overview regarding upcoming events and developments.

Diversion Evaluation Committees (DEC)

On April 14th two students from a nearby nursing program attended a DEC meeting in Southern California believing it was a regular BRN board meeting. The DEC members and diversion program manager took the opportunity to educate the students about the Diversion Program and the dangers of substance abuse. The Maximus case manager provided information to the students and will schedule a presentation for the nursing program at a later date.

In response to a mass mailing done in February 2011, several physicians with expertise in substance abuse disorders have contacted the Board requesting the opportunity to serve as DEC members. We are thrilled with the response and support. Several physicians have already been interviewed and several more are scheduled for interviews in the near future. We have provided a list of new applicants in today’s packet for your consideration.

There are currently 12 vacancies as follows: four Registered Nurses, five Physicians, and three Public members. Recruitment efforts continue.

Statistics

Attached is the Monthly Statistical Summary Report for February and March, 2011. As of March 31, 2011, there were 1,545 successful completions.

**BOARD OF REGISTERED NURSING
DIVERSION PROGRAM
STATISTICAL SUMMARY
April and May**

	CURRENT MONTHS	YEAR TO DATE (FY)	PROGRAM TO DATE
INTAKES COMPLETED	29	128	4,224
INTAKE INFORMATION			
Female	24	98	3,326
Male	5	30	898
Average Age	45-49		
Most Common Worksite	Hospital		
Most Common Specialty	Medical Surgical		
Most Common Substance Abused	Alcohol/Hydrocodone		
PRESENTING PROBLEM AT INTAKE			
Substance Abuse (only)	13	75	2,764
Mental Illness (only)	0	1	145
Dual Diagnosis	15	50	1,272
Undetermined	1	2	43
REFERRAL TYPE*			
Self	16	48	1,295
Board	13	77	2,929
*May change after Intake			
ETHNICITY (IF KNOWN) AT INTAKE			
Asian	0	3	83
African American	1	3	132
Hispanic	1	9	159
Native American	1	2	30
Pacific Islander	1	3	17
Caucasian	24	107	3,477
Other	1	1	60
Not Reported	0	0	266
CLOSURES			
Successful Completion	7	61	1,545
Failure to Derive Benefit	3	3	105
Failure to Comply	7	15	921
Moved to Another State	0	0	51
Not Accepted by DEC	1	3	42
Voluntary Withdrawal Post-DEC	1	4	284
Voluntary Withdrawal Pre-DEC	7	17	409
Closed Public Risk	3	27	209
No Longer Eligible	0	2	19
Client Expired	0	1	37
TOTAL CLOSURES	29	133	3,622
NUMBER OF PARTICIPANTS: 493 (as of March 31, 2011)			

12.5.1 Committee Member Term Resignations

Carol Stanford presented this report

In accordance with B & P Code Section 2770.2, the Board of Registered Nursing is responsible for appointing persons to serve on the Diversion Evaluation Committees. Each Committee for the Diversion Program is composed of three registered nurses, a physician and a public member with expertise in chemical dependency and/or mental health.

The following Diversion Evaluation Committee member has resigned for personal reasons. Efforts will be recognized and a letter of appreciation will be mailed out.

RESIGNATION

NAME	TITLE	DEC	NO
Marva Roddy	Nurse	Palm Springs	6
Shannon Chavez	Physician	San Diego	10
Elinore McCance-Katz	Physician	Oakland	13

12.5.2 Diversion Evaluation Committee Member Appointments

Carol Stanford presented this report

In accordance with B & P Code Section 2770.2, the Board of Registered Nursing is responsible for appointing persons to serve on the Diversion Evaluation Committees. Each Committee for the Diversion Program is composed of three registered nurses, a physician and a public member with expertise in substance use and abuse disorders and/or mental health.

APPOINTMENTS

Below are the names of candidates who were interviewed and are being recommended for appointment to the Diversion Evaluation Committees (DEC). Their applications and résumés are attached. If appointed, their terms will expire June 30, 2015.

<u>NAME</u>	<u>TITLE</u>	<u>DEC</u>	<u>NO</u>
Tonia Jones	RN	Orange County	4
Julie Gordon-Browar	RN	Fresno	5
Mason Turner	Physician	Fresno	5
Jacqueline Perry	RN	Palm Springs	6
Sam Shapiro	Physician	Burbank	8
Michael Parr	Physician	North Central	12

REAPPOINTMENTS

Below are the names of members who are being recommended for reappointment to the Diversion Evaluation Committees (DEC). Their requests and résumés are attached. If appointed, their terms will expire June 30, 2015.

<u>NAME</u>	<u>TITLE</u>	<u>DEC</u>	<u>NO</u>
Patti Velez	Public	Ontario	9
Stephen Miller	Public	North Coast	11
Patricia Butler	Nurse	North Central	12

Below are the names of members who are being recommended for term extensions to the Diversion Evaluation Committees (DEC). Their requests and résumés are attached. If appointed, their terms will expire June 30, 2014.

<u>NAME</u>	<u>TITLE</u>	<u>DEC</u>	<u>NO</u>
Mike Mayo	Public	Fresno	5
Sheila Messina	RN	North Coast	11

Below are the names of members who are being recommended for term extensions to the Diversion Evaluation Committees (DEC). Their requests and résumés are attached. If appointed, their terms will expire June 30, 2013

<u>NAME</u>	<u>TITLE</u>	<u>DEC</u>	<u>NO</u>
Gordon Ogden	RN	Fresno	5
Rosemary Miller	RN	Oakland	13

TRANSFER

Below are the names of the DEC members who are being recommended for a transfer to another committee.

<u>NAME</u>	<u>TITLE</u>	<u>DEC</u>	<u>NO</u>
Christopher Schaal	RN	Oakland	13
Glen Wedeen	Physician	Ontario	9

MSC: Todero/Ware that the Board approves appointments. 6/0/0

13.0 Report of the Education/Licensing Committee

Catherine Todero, PhD, MSN, RN Chairperson

13.1 Ratify Minor Curriculum Revision

Miyo Minato presented this report

- Sonoma State University Entry Level Master's Degree Nursing Program
- University of San Francisco Entry Level Master's Degree Nursing Program Clinical Nurse Leader
- California State University, Fullerton, Baccalaureate Degree Nursing Program
- The Valley Foundation School of Nursing at San Jose State University Baccalaureate Degree Nursing Program
- Carrington College Associate Degree Nursing Program
- Chabot College Associate Degree Nursing Program
- College of the Siskiyous LVN to RN Associate Degree Nursing Program
- Fresno City College Associate Degree Nursing Program
- West Hills College Lemoore Associate Degree Nursing Program

Progress Report:

- Los Angeles Trade Tech College Associate Degree Nursing Program

C. Todero commented that the Education/Licensing Committee ratified the report. No motion made.

13.2 Education/Licensing Committee Recommendations

Miyo Minato presented this report

- A. Continue Approval of Prelicensure Nursing Program
 - Los Angeles Pierce College Associate Degree Nursing Program
- B. Defer Action to Continue Approval of Advanced Practice Nursing Program
 - California State University, Dominguez Hills, Nurse Practitioner Program
- C. Approve Major Curriculum Recommendations
 - Sonoma State University Baccalaureate Degree Nursing Program
 - University of California, Irvine, Baccalaureate Degree Nursing Program

MSC: Graves/Ware that the Board approve A, B & C. 7/0/0

13.3 Discussion of Areas of Noncompliance, of United States University Entry Level Master's Degree Nursing Program, and Possible Board Action

Miyo Minato presented this report

The Board staff conducted a continuing approval review at United States University's (USU) ELM Program following receipt of two separate complaints from USU's March

2011 Cohort II Class students around May 4, 2011. The nature of the complaint from the two graduates alleged that students in this graduating class received none or very little pediatric clinical experience in their course and that the program submitted forms to the BRN verifying that students met the required clinical hours for program completion. A third student complaint was received on Tuesday, June 7, 2011 by e-mail and phone with the NEC – this student from Cohort II reported that they also did not complete pediatric clinical rotation but had not yet applied for Licensure/NCLEX eligibility. The complainants desire to complete the missed clinical hours for pediatric experience in order to meet licensure requirements.

Leslie Moody and Miyo Minato, NECs had multiple contacts with representatives from USU, including the director, the provost, faculty, and the complainants subsequent to learning about the complaint. Leslie Moody conducted interviews with the complainants and other students, and faculty. Miyo Minato worked with the director and faculty.

Initial program visit was made on May 9, 2011 to inform the program of the complaint received and to obtain information to clarify questions related to complainants' allegations. The complainants claimed that they had no pediatric clinical experience in a hospital setting and that their only pediatric experience was at YMCA, teaching a group of children (ages 5-9) on topic of safety, and the students stated they taught students hand-washing.

The nursing leadership at USU (previously known as InterAmerican College) had multiple changes in program directors and college administration since the initial start in August 2008.

- August 2008 to November 2009 – Dr. Elisabeth Hamel was their initial director;
- August 2009 InterAmerican College changed ownership to for-profit Education Sinificativa, LLC.
- November 2009 – October 2010 – Hazel Hargrove from Arizona became the director.
 - Melissa Stoutenberg, RN, a faculty approved for Med-Surg was hired as the Clinical Services Manager (June 2010 to April 2011). Her responsibilities included arranging clinical placements.
- February 2010 – InterAmerican College was sold, and a new administrative team was installed, including Dr. Yoram Neumann, President; Dr. Edith Neumann, Provost; Tom Finaly, Chief Operating Officer, started the reorganization of the university.
- April 2010 – The name of the school was changed to United States University.
- November 2010 to June 2011 – Dr. Carmen Galang, who was the NP Program Director, assumed the position as ELM Program Director until her resignation on June 7, 2011
- May 24, 2011 – Dr. Hamel was rehired as Assistant Director.
- June 7, 2011 – Dr. Hamel was appointed as Interim Director.

According to Dr. Galang at the time the new administration assumed operation of ELM from Hazel Hargrove in September or October 2010, she told them that all of the clinical placements were in order for the coming year, which everyone assumed it to be true.

Initially specific information on Cohort II's pediatric clinical rotation, such as who was the assigned clinical faculty and where the students practiced pediatrics, was difficult to obtain. Dr. Galang stated she was not familiar with the program and records were not readily available. Additionally, the school had relocated two days prior to May 9, from

the previous National City location to a new building in Chula Vista, which created difficulty with locating records. The information the NEC's were able to obtain at this initial visit indicated that complainants' allegations had merit. This information from May 9th visit was reported to Louise Bailey, Executive Officer. Immediate actions were taken related to licensing and applications for Cohort II graduates. There are 39 graduates from Cohort II, nine of whom had already passed the NCLEX examination and achieved licensure and most of the remaining are in some stage of application for licensure.

Current admission pattern at USU has moved from initially approved 20 students per year to admitting 20 or more students three times a year. The table below shows the cohorts and the admission number as well as their projected completion dates.

Table of Admitted Students to United States University (aka InterAmerican College)

Cohort	# Students in Cohort	Start Date	Completion Date/ Projected Date
1	13	Aug 4, 2008	Dec 4, 2009
2	39	Aug 31, 2009	Mar 4, 2011
3	16	Jan 6, 2010	Jun 19, 2011
4	14	Mar 25, 2010	Aug 28, 2011
5	42	Aug 30, 2010	Dec 18, 2011
6	40	Jan 4, 2011	Apr 29, 2012
7	21	May 4, 2011	Aug 24, 2012
Total	185		

Note: Actual numbers of enrolled students for each of cohorts #2-7 are higher than admission numbers in this chart due to students who enroll in a second cohort track after a brief exit for personal or other reasons that did not allow them to complete the program with their original cohort or due to failure of a course.

The NCLEX Pass Rate for the program shows eight passed out of eleven takers, making their pass rate as 54.5%. More detailed is presented in the NEC's Report.

On June 8 – 9, 2011, the program visit was conducted by the NECs and the Executive Officer. Interviews were conducted with students, faculty, and agencies (Sharp Coronado Hospital (MS), Edgemoor (SNF), and Balboa Naval Hospital). The attached "Report of Findings" summarizes the findings related to the regulations. There were nine areas of noncompliance, involving 14 sections:

- Program Resources: Sec 1424(d);
- Assistant Director: Sec. 1424(f) and 1425(b)
- Faculty Responsibilities: Sec. 1424(g) and 1424(j)
- Faculty Qualifications: Sec. 1424(h) and 1425(f), 1425.1(a), 1425.1(d)
- Curriculum: 1426(b)
- Concurrent Theory and Clinical 1426(d)
- Clinical Facility: 1427(b)
- Student Participation: 1428
- Policy Relating to Eligibility for Examination: 1428.6(b)

Three recommendations were made: Sec. 1424(b) Policies and Procedures; 1424(b)(1) Evaluation; and 1424(c) Organizational Chart

For Cohort II graduates, their pediatric experience at National City School District and YMCA, were done without clinical supervision by a qualified pediatric faculty from the university, and therefore, are considered unsupervised experience and would not meet the requirements to fulfill the required 96 clinical hours for the curriculum. The program has

submitted a list of rotations for 41 students (39 Cohort II students and two students from Cohort 4) for their clinical experience at a pediatric unit and pediatric outpatient clinic at El Centro Regional Medical Center. These students will complete the required 96 hours of supervised pediatric experience. They have arranged for three Board approved clinical faculty and the plan is to start the week of June 12, 2011.

Multiple changes and deficits in nursing leadership and changes in the ownership of the university resulted in disjointed and disorganized implementation of the nursing curriculum resulted in the current state of deficiencies identified at this visit. The most serious of these concerns is that students in Cohort II and some in Cohort IV were not provided the appropriate clinical placement and supervised clinical practice in pediatrics concurrent with the related theory content. The NECs met with the President, the Provost, the Chief Operating Officer, and the Interim Director, who all expressed commitment to correcting the deficiencies and bringing the program into compliance. The Board staff will monitor the program until all of the areas of noncompliance and recommendations are addressed by the program.

Public comment:

Genevieve Clavrel, RN

Nanette Logan, SEIU

Mike Zweiback, Attorney representative for Students of USU

Christine Dewick, Student

Arica Hernandez, Student

Kathy Stow, Student

Edith Neumann, PhD, RN-Provost and Chief Academic Officer of USU

Nanette Logan, SEIU CNA

Grace Corse, RN SEIU NA Los Angeles

Juan Del Rosario, Student

Margarita Jovonde, Attorney representing the Students of USU

Barbara Blake, State Secretary, UNAC, UHCP

Kristene Dacuycuy, Student

Nicole Fry, Student

Gloria Mattson Huerta, Student

Marc Greenberg, representing USU

MSC: Todero/Corless that the Board requesting the School (USU) to assure the students are given bona-fide pediatrics experience with the hours that are required by the Board. Priority for students who can prove they have a job pending. 7/0/0

MSC: Todero/Ware that the Board recommends putting the program on warning status with intent to remove approval. No new admissions and must return to the Board in September with a progress report or plan to remedy the issues and put in writing. 7/0/0

13.4 Initial Approval of Prelicensure Nursing Program

Leslie Moody presented this report

- ITT Technical Institute, Rancho Cordova, Associate Degree Nursing Program

MSC: Corless/Harrison that the Board motions to grant initial approval of prelicensure nursing program to ITT Technical Institute, Rancho Cordova, ADN Program. 7/0/0

13.5 Feasibility Study for Prelicensure Registered Nursing Program

Carol Mackay presented this report

- 13.5.1 Stanbridge College Associate Degree Nursing Program
- Weimar College Associate Degree Nursing Program

MSC: Ware/Harrison that the Board approve Stanbridge College ADN Program. 6/0/1
(J. Corless, abstain)

MSC: Ware/Niemela that the Board approve Weimar College ADN Program. 6/1/0

D. Bradley provided comment.

13.6 Proposal to Require Accreditation of an Institution of Higher Education to Offer Prelicensure Registered Nursing Program

Miyo Minato presented this report

During the regulatory process for the recently approved education regulations, the concept of requiring accreditation of all prelicensure nursing programs was raised. Several commentators submitted public comments on the proposed regulations recommending an accreditation requirement. At the January 2011 meeting, Education/Licensing Committee recommended to accept the comments and to consider promulgation of separate regulatory proposal requiring that institutions of higher education be accredited. At its February 2011 meeting, the Board decided that it would be in the public interest to hold public forums for the purpose of gathering input prior to developing regulatory proposal language.

Four public forums were scheduled on separate dates in four California locations (Sacramento, Los Angeles, Fresno, San Diego) beginning April 26 and ending June 14, 2011. Notices of the public forum dates and locations, and a background information document were posted on the BRN website on March 21 and were mailed to stakeholders as identified and requested. Direction included for public comments asked for their position on two accreditation questions:

1. Should an institution of higher education that offers prelicensure registered nursing be accredited?
2. What accreditation should be the required for the institution of higher education?

Three of the public forums have been completed on April 26 in Fresno, on May 10 in San Diego and on May 17 in Los Angeles. The last public forum is in Sacramento on June 14, and all input are to be submitted to the Board by 5:00 PM on the 14th. In addition to oral input presented at forums, written communications, including e-mails, have been received from interested parties. All of the inputs thus far have been collated and included as attachments.

Twenty-five (25) participants have either presented at a public forum or submitted a response thus far. The general consensus of opinions expressed at the public forums is summarized below:

- WASC/regional accreditation and national accreditation have similar standards and accreditation process and are both recognized by the United States Department of Education (USDOE).

- WASC and national accreditations assure that the schools reviewed have met a set of standards and ensure the quality of education provided.
- 100% of presenters and/or respondents agreed that institutional accreditation should be required for a school that offers a prelicensure registered nursing program.
- Twenty of twenty-three (20/23) participants who presented at public forums opposed limiting the accreditation to WASC/regional accreditation only. These participants preferred that the Board accept a national accreditation recognized by USDOE.
- All participants who commented on the issue of transferability voiced that transferability of credits is of major concern. Transfer of students' credits taken at any one institution cannot be guaranteed, regardless of the type of accreditation the school has. A school needs to have articulation agreements to ensure transfer of credits.
- A majority of public universities (UCs, CSUs) and community colleges in California do not accept transfer credits from non-WASC accredited schools.

Attachments:

1. Public Forum-Fresno Summary of Discussions
2. Public Forum-San Diego Summary of Presentations
3. Public Forum-San Diego Minutes
4. Public Forum-Los Angeles Minutes
5. Four documents on information related to accreditation provided by West Coast University .
- 6 and 7. Copy of presentations submitted at Public Forum in LA.

MSC: Niemela/Corless that the Board directs staff to seek the legislative authorization necessary allowing the Board to require that schools have institutional accreditation in order to approve their programs. 7/0/0

Public comment:

Trisha Hunter, ANA-C
 Kelly Green, CNA
 Diane Moore, West Coast College
 Brian Stiger, DCA Acting Director

PUBLIC FORUM-MINUTES

RE: Proposed regional accreditation requirement for schools providing or affiliating with a prelicensure registered nursing program.

DATE/TIME: Tuesday, June 14, 2011 1:00 pm - 3:00 pm

LOCATION: DCA Hearing Room, 1625 N. Market Blvd, Room S 102, Sacramento, CA

Name/Title/Organization	Accred.	Regional	Comments	Written Copy Provided
Bonny Nickle, Chief Academic Officer/Sr. Vice President Education International Education Corp (IEC) (Emailed 6/14/11)	Support	Oppose	A review of the outcomes that regional accreditation agencies employ for programmatic oversight and quality prove to be less stringent and with far lower expectations of student persistence and graduation rates. There is an absence of supporting data or empirical evidence that regional accreditation equates to a higher quality program and the California Department of Education as well as CHEA, do not make a distinction between nationally or regionally accredited institutions.	
Zeneida Mitu, School Director Trinity Vocational Center (Emailed 6/14/11)	Support	Oppose	TVC has undergone rigorous accreditation in order to produce qualified and competent graduates responsive to the changing needs of the community the institution serves. TVC is approved by Bureau for Private Postsecondary and Vocational Education (BPPVE) and is approved to participate in programs under the Higher Education Act of 1965, as amended (HEA) and the Federal student financial assistance programs (Title IV, HEA programs). TVC is also approved and accredited by Vocational Nursing and Psychiatric Technicians (BVNPT) and by the Accrediting Bureau of Health Education Schools (ABHES). For this reason, Trinity Vocational Center does not support BRN's proposal to only consider accreditation by WASC.	
Students (past and current), faculty and others from Kaplan College (44 individual emails received 6/11/11) 10 – staff/faculty; 19 past graduates, and 15 current students)	Support	Oppose	Emails spoke against requiring regional accreditation as they feel it provides no better guarantee than national accreditations.	
Name/Title/Organization	Accred.	Regional	Comments	Written Copy Provided

Michael D. White, Director of Legal & Regulatory Affairs Accrediting Bureau of Health Education Schools (ABHES) (Emailed 6/13/11)	Support	Oppose	Because WASC and ABHES (and several other institutional accrediting bodies operating nationally) have all passed the same federal recognition standards, and because there is no other equally valid test of the legitimacy of an accrediting body, the proposal to discriminate in favor of WASC is arbitrary, likely illegal, and against the public interest. ...ABHES fully supports a requirement that institutions offering nursing programs be accredited by an agency recognized by the United States Department of Education. Such a regulation would not only be lawful, but would be in the interests of all California citizens and not just those affiliated with regionally accredited institutions.	X
Garrett Warrick, RN. Graduated from a private college that was nationally accredited but was not WASC accredited.	Support	Support	Mr. Warrick made a statement that he has not been able to find employment as RN since his graduation and earning a RN license and was still working as LVN. He decided to pursue further nursing education and shared his experience. "Last week was the end of the semester for me, back at my community college, where I completed - AGAIN- Introductory Sociology that I initially finished in nursing school, and a needed UC-transferrable English/Logic/Argumentation Course. I have applied to several schools in the CSU and UC systems, and I was told by all of the admission representatives that NONE of my credits that I completed would be accepted because my school did not have WASC accreditation."	X
Blanca Gonzales, PA	Support	Oppose	Ms. Gonzales shared her experience with the BRN evaluation of her education and credits applied to nursing licensure. After sharing her experience and concerns related to assumption that WASC accreditation implied automatic acceptance of transfer credits by another WASC institution, she indicated that she opposes limiting accreditation to WASC.	X
Name/Title/Organization	Accred.	Regional	Comments	Written Copy Provided
Laura Brown, President The California Coalition of Accredited Career	Support	Oppose	The Coalition is supportive of accreditation of prelicensure nursing programs. Specifically, The Coalition supports accreditation by an institutional accreditor recognized by the U.S.	X

Schools			Department of Education for prelicensure nursing programs. However, they are opposed to a specific requirement mandating regional accreditation. Mandating regional accreditation has no bearing on the issue of transferability of academic credits. During the March 4th Oversight Hearing of the Senate Committee on Business, Professions and Economic Development the committee and staff had concerns about imposing a regional mandate.	
Jeff Wilkinson, ITT Technical Institute	Support	Oppose	Mr. Wilkinson expressed his support for the institutional accreditation but opposed limiting to WASC accreditation citing it would unfairly limit access for nursing education to students schools nationally accredited that provide quality nursing program. He discussed rigor of national accreditation standards as being equal to that of regional accreditation.	
Chris Torkilson, Director RN Programs Unitek College	Support	Oppose	Passing legislation requiring the use of one accrediting body would cause undue hardship for smaller programs, potentially close some quality programs and is completely against the basic American premise – Freedom of Choice, all things equal. If regional accreditation would ensure comparable quality between all schools of nursing within CA we would wholeheartedly endorse this endeavor. However, it does not. Requiring accreditation by accrediting bodies that utilize stringent criteria demanding accredited programs meet the highest measures of quality should be the goal – and not only one accrediting body ensures this. As noted above after completing a crosswalk between ACCSC, WASC and NLN, WASC criteria are not as stringent as ACCSCS.	X
Name/Title/Organization	Accred.	Regional	Comments	Written Copy Provided
Margarita Valdes, Chief Academic Officer Unitek College	Support	Oppose	In our region the community colleges do not automatically accept general education courses from WASC accredited private schools, 4 year programs do not always accept graduates from WASC accredited associate degree programs – all other criteria being equal. We believe that the intent of this regulation is noble; however, we strongly believe that without more than just	X

			mandating the use of one regulating body the intent will never be realized. Ms. Valdes spoke of her experience at Texas where they reached this goal by both public and private schools worked together so that transfer of credits would be possible for students. She stated that the first thing that is needed is to get all interested parties at the same table both private and public. These public forums are not the means nor are they effective.	
Robert Johnson, Executive Director California Association of Private Postsecondary Schools (CAPPS)	Support	Oppose	Mr. Johnson's written statement indicated that the Association object to both the form and the substance of this proposal. He wrote that he has attended all four of the public forums and have found them to be unstructured and to be more of a platform for the BRN staff to orally announce their concerns with Nationally Accredited Institutions, reading anonymous emails expressing dislike and dissatisfaction with Nationally Accredited Institutions. Mr. Johnson indicated that applicable statutory and case law demonstrate that the BRN proposal is not only unlawful, it judicially contradicted BRN staff statements and conclusions. The statement submitted addresses specific points in the section CAPPS Response to the BRN supporting "bias" for the proposed Regional Institutional Accreditation Requirement.	X
Paul A. De Giusti, Vice President Government Affairs Corinthian Colleges, Inc. (CCi)	Support	Oppose	Mr. De Giusti's statement Requiring postsecondary institutions to change institutional accreditors in order to gain approval from the BRN would impose an unnecessary barrier for their institutions unrelated to the quality of the precicensure program that an institution could offer. His statement further addresses each area described in the BRN's Background Information Paper. He provided a copy of "Joint Statement on the Transfer and Award of Credit" (9/28/01) written by representatives of American Association of Collegiate Registrars and Admission Officers, American Council on Education and Council for Higher Education Accreditation.	X
Name/Title/Organization	Accred.	Regional	Comments	Written Copy Provided
Sara Mason, Staff to State Senate Business & Professions Committee	Support	Oppose	Ms. Mason shared that at the March 4th Senate Oversight Hearing of the Senate Business and Professions Committee the committee and staff expressed a concern about imposing a regional accreditation for purpose of approving a school program could be discriminatory and unconstitutional.	
DeAnn McEwen,	Support	Oppose	CNA is of the position that regional accreditation provides a framework and	X

California Nurses Association; Statement written by Kelly Green, Regulatory Policy Specialist			standards for educational institutions that are designed to meet California's unique regional, state, and local education standards. With the ongoing budget challenges facing California's public education system, more and more students are turning to private proprietary schools to obtain a nursing education. Many of these schools are placing a heavy reliance upon alternative models of education such as online and distance learning and simulation. Thus, it is of utmost importance that these institutions are required to meet the same rigorous standards that traditional and public nursing programs must meet in order to preserve and protect the integrity and reputation of nursing education in our state.	
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PUBLIC FORUM-MINUTES

RE: Proposed regional accreditation requirement for schools providing or affiliating with a prelicensure registered nursing program.

DATE/TIME: May 10, 2011 1:00 to 3:00 PM

LOCATION: State of California Office Building 1350 Front Street, B-109, San Diego, CA

There were about 17 attendees.

Name/Title/Organization	Accred.	Regional	Comments	Written Copy Provided
Christopher Lambert, Director of External Affairs, Accrediting Commission of Career Schools and Colleges (ACCSC) presented representing his organization and additional representatives of organizations which included: Carol Moneymaker, Executive Director, ABHES; Gary Puckett, PhD, Executive Director, COE; Albert C. Gray, PhD, Executive Director, ACICS; Roger J. Williams, Executive Director, ACCET; Michale S. McComis, EdD, Executive Director, ACCSC; Michael P. Lambert, Executive Director, DETC.	Support	Oppose	Stated that they support a requirement for accreditation but oppose the limitation of regional accreditation only as they a requirement for national accreditation by a US Department of Education recognized agency will result in the same quality without unfairly limiting schools' options for accreditation. He asserted that there is no difference between the standards of a regional accrediting body vs. a nationally recognized accrediting body.	Yes
Mr. David Parker and Dr. Lauren Jones of ITT Tech	Support	Oppose	BPPE recognizes all USDE approved accrediting agencies as acceptable and do not limit recognition to WASC. They feel their national accreditation is equivalent to WASC. They support a requirement for accreditation but oppose the limitation of regional accreditation.	
Ms Sandy Comstock of MiraCosta College	Support	Support	No California state colleges can automatically accept credit for transfer from a non-WASC accredited school. She described a transfer application from a student who couldn't obtain	

			admission into a BSN completion program due to the receiving college's rejection of the units earned at a non-WASC accredited school. The student could only choose to continue her education at expensive private schools. Ms Comstock stated that often LVNs coursework is not accepted so that they have to repeat many courses prior to attaining eligibility to enter an RN program at a California state school program. Ms Comstock voiced concerns regarding the ability of RNs to meet the lifelong learning requirement for professionals.	
Name/Title/Organization	Accred.	Regional	Comments	Written Copy Provided
Ms Judy Eckhart of Palomar College	Support	Support	There is a difference between the standards of national and regional accrediting agents. The regional accrediting agents review the school compared to the performance of other schools in the region and the needs of the local [state] needs, rather than in comparison to national. She advised that there is a dilemma created when community colleges are not supposed to allow repeat of the same course previously taken but the course requested for transfer doesn't meet the receiving college's standards. Ms Eckhart also described that very frequently applicants to her college program state they were not advised by the private non-WASC accredited school that their units would not be accepted for transfer by the California state colleges. Ms Eckhart supports a requirement for accreditation and supports a requirement of regional accreditation.	
Ms Joy Brychta, Executive Director, Kaplan College,	Support	Oppose	Advised that her private school holds national accreditation through ACCIS and feels the standards are of the same quality as applied by regional accreditors. She expressed concern that a requirement of regional accreditation may impose an undue burden that could result in closure of some private schools, would not increase the quality of schools, would further limit opportunities for registered nursing education and thus the opportunities for increasing RN numbers in California, and would give the sole regional accrediting body for this region an unfair business advantage. Ms Brychta, representing Kaplan College, supports a requirement for accreditation but opposes a limitation of regional accreditation.	Yes

PUBLIC FORUM-MINUTES

RE: Proposed regional accreditation requirement for schools providing or affiliating with a prelicensure registered nursing program.

DATE/TIME: Tuesday, May 17, 2011 1:00 - 3:00 pm

LOCATION: Ronald Reagan State building, 300 S. Spring Street, Los Angeles, CA

There were approximately 40 participants at the forum.

Name/Title/Organization	Accred.	Regional	Comments	Written Copy Provided
Dana Martin, ITT Tech Los Angeles (ACICS)	Support	Oppose	National accreditation and WASC accreditation standards are similar. Both ensure quality. Transfer of credits is not guaranteed by having regional accreditation.	
Brian Newman, Association of Private Sector Colleges and Universities (APSCU)	Support	Oppose	If WASC/regional accreditation is only accepted, the outcome would be closure of nursing programs at nationally accredited institutions and decrease of nursing graduates. Recommend both WASC and national bodies recognized by the USDOE.	Yes
Dianne Moore, West Coast University	Support	Oppose	There should be transferability of credits between institutions. The problem is that transferability of credit is not consistent and is not guaranteed no matter what accreditation organization is involved.	Yes
Bill Kalish, West Coast University	Support	Oppose	Provided written documents for the Board	
Dianna Sherlin, American University Of Health Sciences	Support	Oppose	Support accreditation of colleges by organizations recognized by USDOE or CHEA	Yes
Gregory Johnson, American University of Health Sciences	Support	Oppose	Should not limit students from becoming health care professionals, which requiring only WASC would do. Should not limit access to those underserved group of students. "Don't narrow the door"	
Albert Gray, Accrediting Council for Independent Colleges and Schools (ACICS)	Support	Oppose	Recommend that Board adopt a regulation that requires that the institution offering a nursing must be institutionally accredited by an agency recognized by, and in good standing with, the USDOE.	Yes
Yohan Pyeon, Shepherd University	Support	Oppose	Asked why the Board limited the accreditation to regional accreditation/WASC. Credits from nationally accredited institutions can transfer when there is an articulation agreement. Recommend that Board should allow schools to choose national or WASC accreditation and not discriminate a school that might have different purpose and mission and to provide sufficient time to obtain the required accreditation.	Yes

Name/Title/Organization	Accred.	Regional	Comments	Written Copy Provided
Undergraduate Nursing Advisor, CSU Fullerton	Support	Support	Email received reported that at least one call is received each week from a graduate of a local non-WASC accredited university and she has to explain that CSUF cannot accept their credits. She indicated that this problem is a huge problem locally (Orange County) and also in San Diego.	

BRN Public Forum - Fresno

April 26, 2011 (10:00 AM to 12:00 PM)
at Fresno State Office

Summary of Discussions

Purpose of the forum was to hear public comments related to the BRN's consideration for a proposal to require regional accreditation for schools offering prelicensure RN program.

Eight participants were at the forum. No written opinions were presented by the attendees. It was explained at the start of the meeting that the BRN was gathering information and no responses were going to be made.

Joe Brickman of Gurnich Academy of Medical Arts and Paul DeGiusti from Corinthian Colleges spoke and other attendees indicated that they were in attendance to hear the discussions and was not prepared to make any statements.

Mr. Brickman asked for the reason why the BRN was restricting the accreditation to WASC and not considering other national accrediting organizations recognized by the US Dept. of Education. He stated that accepting transfer of credits is left to the school accepting the course credits and national accreditations are recognized as well as WASC/regional accreditation. He stated that limiting to WASC/regional accreditation was restricting commerce. He gave an example of Arizona State Board and their recognition of national accreditation for the nursing schools.

Mr. Robert Johnson from California Association of Private Post-secondary Schools (CAPPS) asked for information specific to the proposal for accreditation. It was explained that this was a preliminary stage to gather public information and no specific regulatory language has been developed other than there is consideration to require WASC accreditation for nursing programs in California.

Mr. de Giusti stated that he now understands the rationale being presented by the BRN for identifying WASC/regional accreditation in the proposal being considered. He further added that he represents the for-profit institutions that offer nursing programs in California and supports inclusion of national accreditations. He stated that he will be submitting written materials in this matter to the BRN.

BRN Public Forum

May 10, 2011 1:00-3:00pm
San Diego, CA

Summary of Presentations

The purpose of this forum was to hear public comments related to the BRN's consideration of a proposal to require regional accreditation for schools offering or affiliating with a prelicensure registered nursing education program.

Seventeen persons attended the forum. Seven persons presented, two of whom provided written copies of their presentation (copies attached). Other attendees advised they were in attendance to hear the opinions and information presented.

Attendees were advised regarding the purpose of the forum and that all information provided at the forum or via mail in regards to this issue would be presented to the board. It was explained that this forum was provided to gather input and that responses would not be made to input presented.

Christopher Lambert, Director of External Affairs, Accrediting Commission of Career Schools and Colleges (ACCSC) presented representing his organization and additional representatives of organizations which included: Carol Moneyemaker, Executive Director, ABHES; Gary Puckett, PhD, Executive Director, COE; Albert C. Gray, PhD, Executive Director, ACICS; Roger J. Williams, Executive Director, ACCET; Michale S. McComis, EdD, Executive Director, ACCSC; Michael P. Lambert, Executive Director, DETC. Christopher Lambert stated that they support a requirement for accreditation but oppose the limitation of regional accreditation only as a requirement for national accreditation by a US Department of Education recognized agency will result in the same quality without unfairly limiting schools' options for accreditation. He asserted that there is no difference between the standards of a regional accrediting body vs. a nationally recognized accrediting body.

Mr. David Parker and Dr. Lauren Jones of ITT Tech asserted that the BPPE recognizes all USDE approved accrediting agencies as acceptable and do not limit recognition to WASC. They feel their national accreditation is equivalent to WASC. They support a requirement for accreditation but oppose the limitation of regional accreditation.

Ms. Sandy Comstock of MiraCosta College stated that no California state colleges can automatically accept credit for transfer from a non-WASC accredited school. She described a transfer application from a student who couldn't obtain admission into a BSN completion program due to the receiving college's rejection of the units earned at a non-WASC accredited school. The student could only choose to continue her education at expensive private schools. Ms. Comstock stated that often LVNs coursework is not accepted so that they have to repeat many courses prior to attaining eligibility to enter an RN program at a California state school program. Ms. Comstock voiced concerns regarding the ability of RNs to meet the lifelong learning requirement for professionals.

Ms. Comstock supports a requirement for accreditation and supports a requirement of regional accreditation.

Ms. Judy Eckhart of Palomar College stated that there is a difference between the standards of national and regional accrediting agents. The regional accrediting agents review the school compared to the performance of other schools in the region and the needs of the local [state] needs, rather than in comparison to national. She advised that there is a dilemma created when community colleges are not supposed to allow repeat of the same course previously taken but the course requested for transfer doesn't meet the receiving college's standards. Ms. Eckhart also described that very frequently applicants to her college program state they were not advised by the private non-WASC accredited school that their units would not be accepted for transfer by the California state colleges. Ms. Eckhart supports a requirement for accreditation and supports a requirement of regional accreditation.

Ms. Joy Brychta, Executive Director, Kaplan College, advised that her private school holds national accreditation through ACCIS and feels the standards are of the same quality as applied by regional accreditors. She expressed concern that a requirement of regional accreditation may impose an undue burden that could result in closure of some private schools, would not increase the quality of schools, would further limit opportunities for registered nursing education and thus the opportunities for increasing RN numbers in California, and would give the sole regional accrediting body for this region an unfair business advantage. Ms. Brychta, representing Kaplan College, supports a requirement for accreditation but opposes a limitation of regional accreditation.

13.7 2009–2010 Post-Licensure Program Annual Report

Leslie Moody presented this report

In 2004-2005, the BRN first surveyed California post-licensure nursing programs. The 2009-2010 Post-Licensure Nursing Program Report presents analysis of the current year data in comparison with data from previous years of the survey.

Since post-licensure nursing programs offer a wide range of degrees, this report is presented in program sections, including RN to BSN Programs, Master's Degree Programs and Doctoral Programs. Data items addressed in each program section include the number of nursing programs, enrollments, graduations, and student census data. Faculty census data is included in a separate section as it is collected by school, not by degree program.

Public comment:

Brian Stiger, DCA Acting Director

13.8 Licensing Program Overview and Statistics Report

Bobbi Pierce presented this report

Program Update:

The Board of Registered Nursing Licensing Program has been processing applications for graduates wanting to take the NCLEX-RN. California schools are able to provide the Board with information for their graduates a minimum of 4 weeks prior to the graduation date; however, we are still finding that some schools are not submitting documentation until after the graduation date. We have found that by the schools waiting until after the graduation date to send the Individual Candidate Rosters, the chances of a student who did not complete all educational requirements being deemed eligible for the examination decreases.

From February 23, 2011 to April 30, 2011, 270 new California graduates have been deemed eligible to take the NCLEX-RN examination. Currently, the Licensing Unit has received Individual Candidate Rosters for 1,462 students scheduled to graduate in May. The processing of these applications will be completed when the student had graduated.

The Licensing Program is still facing some challenges. The Licensing Unit still has vacant positions for three Key Data Operators (KDOs); and the Office Services Supervisor II (OSSII) for the Support Unit. These positions are vital to maintain the workflow in the Licensing Unit. The KDOs create the new files that are then directed to the Evaluators for processing. The OSSII supervises the Support Unit to ensure that applicant files are created and distributed to the Evaluators in a timely manner.

The remaining 4 Key Data Operators have risen to the challenge of the increase in the number of applications. They all have now received training and are now able to assist in

all aspects of the Support Unit. Because of their diligence; we currently have no backlog of applications.

Statistics:

The Department of Consumer Affairs, in conjunction with the Board, continues to provide statistical reports to the Governor's Office and the State and Consumer Services Agency on a monthly basis for the Licensing and Job Creation Report. This project has been on-going since January 2010 and the Board has been an active participant in meeting the goals of the program to contribute towards

California's job growth through expeditious and efficient processing of professional pending examination and licensing applications.

The statistics for the last two fiscal years and ten months of Fiscal Year 2010/11 are attached. You will note that there is a decrease in the number of applications for examination, endorsement, and repeaters during the last two fiscal years. It is believed that this is due to the economic slowdown and the Boards no longer accepting applications that do not include a United States Social Security Number.

Issues:

- Staff is now receiving an increase in transcripts from Philippine applicants who have completed a two-year preparatory program. At the completion of the program the student is awarded a Certificate in Two-Year Associate in Health Science Education (AHSE). This course complies with the Commission on Higher Education (CHED) and comprises the general education component of all Baccalaureate degrees in the Health Professions. It is only to be offered in Colleges and Universities with recognized health programs. Our concern is that credit(s) for nursing course work offered in this AHSE program may be accepted to meet registered nursing level course work.

Based on the information we have received, upon completion of the two-year preparatory course, the graduates are equipped with the appropriate competence to function as a "primary health care provider" such as a Health Aide or Community Health Aide.

- Still receiving questionable transcripts and nursing licenses from the Philippines. For example: four applicants who attended the same nursing program had transcripts sent allegedly from their nursing school. The transcripts were questionable which prompted staff to contact the school. A response was received from an official at the school informing us that none of these four applicants attended that school.
- Another applicant began a nursing program in the Philippines. The applicant left the program in 2000 and returned in 2007. The documentation from the program shows that this applicant completed 136 hours of lectures and 408 hours of clinical practice. These hours were completed in 16 weeks, according to the documentation received from the school; however, the applicant was in the Philippines for only 24 days during this time period.
- Credits given for entire programs such as vocational nursing, nursing assistant and MD level to meet RN course work requirements. The student completes minimal

theoretical and clinical course work prior to receiving the degree as a Registered Nurse.

- Modular distance learning programs offering self-directed and/or independent study. These students have only occasional interaction with an assigned tutor, and how, when and where the clinical practice is completed is questionable.
- Still receiving applications from students who attended on-line programs offering degrees based on work and/or experiences and the degree is awarded in as little as 7 days. A transcript for an applicant who completed one of these programs was sent from a company based in the United Arab Emirates.

**CALIFORNIA BOARD OF REGISTERED NURSING
LICENSING STATISTICS**

DESCRIPTIONS	FISCAL YEAR 2008/09			FISCAL YEAR 2009/10			FISCAL YEAR 2010/11 7/1/2010 – 4/30/2011		
	APPS RECEIVED	**APPS PENDING	LICENSES & CERTS ISSUED	APPS RECEIVED	**APPS PENDING	LICENSES & CERTS ISSUED	APPS RECEIVED	**APPS PENDING	LICENSES & CERTS ISSUED
REGISTERED NURSE – EXAMINATIONS ENDORSEMENTS & REPEARS	50,504	8,398	23,624	44,516	7,492	23,357	27,474	6,6693	19,629
CLINICAL NURSE SPECIALISTS	246	13	216	240	27	204	174	40	173
NURSE ANESTHETISTS	142	1	129	139	4	124	135	19	131
NURSE MIDWIVES	38	0	45*	42	0	38	38	3	43
NURSE MIDWIFE FURNISHING NUMBER	37	0	35	37	2	32	19	5	18
NURSE PRACTITIONERS	817	0	804	937	9	854	674	68	807
NURSE PRACTITIONER FURNISHING NUMBER	704	2	660	670	7	598	594	68	635
PSYCHMENTAL HEALTH LISTING	9	1	6	5	1	4	7	3	5
PUBLIC HEALTH NURSE	2,146	98	1,997	2,538	120	2,373	2,371	285	2,377

*Nurse-Midwife applicants are often educated outside of the United States and must remediate course work prior to certification.

**Applications pending – Initial evaluation is complete; additional documentation required to complete file or applicant needs to register with the testing service, Pearson VUE.

13.9 NCLEX-RN Pass Rate Update

Leslie Moody presented this report

The Board of Registered Nursing receives quarterly reports from the National Council of State Boards of Nursing (NCSBN) about the NCLEX-RN test results by quarter and with an annual perspective. The following tables show this information for 12 months and by each quarter.

NCLEX RESULTS – FIRST TIME CANDIDATES
April 1, 2010 – March 31, 2011*/**

JURISDICTION	TOTAL TAKING TEST	PERCENT PASSED %
California	10,998	87.58
United States and Territories	140,855	87.27

CALIFORNIA NCLEX RESULTS – FIRST TIME CANDIDATES

By Quarters April 1, 2010-March 31, 2011*/**

4/01/10- 6/30/10		7/01/10- 9/30/10		10/01/10- 12/31/10		1/01/11- 3/31/11		4/01/10- 3/31/11	
# cand.	% pass	# cand.	% pass	# cand.	% pass	# cand.	% pass	# cand.	% pass
2,114	89.92	4,423	86.03	994	80.38	3,467	90.19	10,998	87.58

**Includes (6),(6),(2) & (6) “re-entry” candidates*

*** 2010 NCLEX-RN Test Plan and a higher passing standard (-0.16 logits) were implemented April 1, 2010.*

The Nursing Education Consultants monitor the NCLEX results of their assigned programs. Current procedure provides that after each academic year (July 1 – June 30), if there is substandard performance (**below 75% pass rate for first time candidates annually**), the NEC requests the program director submit a report outlining the program's action plan to address this substandard performance. Should the substandard performance continue in the second academic year, an interim visit is scheduled and a written report is submitted to the Education/Licensing Committee. If there is no improvement in the next quarter, a full approval visit is scheduled within six months. A report is made to the Education /Licensing Committee following the full approval visit.

California Board of Registered Nursing
NCLEX-RN Pass Rates First Time Candidates
Comparison of National US Educated and CA Educated Pass Rates
By Degree Type

Academic Year July 1, 2010-June 30, 2011

Academic Year July 1-June 30	July-Sept		Oct-Dec		Jan-Mar		April-June		2010-2011 Cumulative Totals
	#Tested	% Pass	#Tested	% Pass	#Tested	% Pass	#Tested	% Pass	
National US Educated- All degree types *	53,342	(84.8)	12,037	(81.7)	35,230	(89.3)			
CA Educated- All degree types*	4,425	(86.0)	994	(80.3)	3,467	(90.1)			
National-Associate Degree rates**	30,237	(84.0)	6,947	(79.9)	20,831	(88.1)			
CA-Associate Degree rates**	2,888	(86.0)	573	(78.5)	2,382	(89.9)			
National-BSN+ELM rates***	21,547	(85.8)	4,831	(83.8)	13,557	(91.0)			
CA-BSN+ELM rates***	1,530	(86.0)	419	(82.8)	1,079	(90.9)			

National rate for All Degree types includes four categories of results: Diploma, AD, BSN+ELM, and Special Codes. Use of the Special Codes category may vary from state to state. In CA, the Special Codes category is most commonly used for re-entry candidates such as eight year retake candidates wishing to reinstate an expired license per CCR 1419.3(b). The CA aggregate rate for the All degree types includes AD, BSN+ELM, and Special Codes but no diploma program rates since there are no diploma programs in CA. CA rates by specific degree type exclude special code counts since these are not reported by specific degree type.

**National and CA rates reported by specific degree type include only the specific results for the AD or BSN+ELM categories.

***Historically, ELM programs have been included in the BSN degree category by NCSSN.

Note: This report includes any quarter to quarter corrections NCSSN has made in data.

Source: National Council of State Boards of Nursing

14.0 Report of the Nursing Practice Committee

Judy Corless, BSN, RN, Chairperson

14.1 Information Only: BRN survey of California Nurse Practitioners, Certified Nurse-Midwives and Clinical Nurse Specialists

Janette Wackerly presented this report

The BRN commissioned the University of California San Francisco (UCSF), Center for the Health Professions to complete a survey of California Nurse Practitioners, Certified Nurse-Midwives and Clinical Nurse Specialists. The purpose of the survey was to learn information about demographics, education, employment, practice and standardized procedure use from these advanced practice nurses in California.

A report is being drafted and Dr. Joanne Spetz from UCSF will be in attendance to provide a presentation of some of the highlights of the data.

Dr. Joanne Spetz from University of California, San Francisco presented the Surveys of California, Advanced Practice Registered Nurses 2010 report.

No public comment.

14.2 Registered Nurse Advisories

Janette Wackerly presented this report

Registered nurse advisories are available at www.rn.ca.gov. When using the BRN home page, locate the cursor on the left hand side of the page, titled “Practice Information”. Then locate the cursor over “registered nurse” for a listing of advisories.

The liaison to the Practice Committee with assistance from the board staff have been updating BRN advisories utilizing the California Nursing Practice Act with Regulations and Related Statutes 2011 edition, and California Law found at www.leginfo.ca.gov as resources. Published nursing textbooks and nursing periodical may also be used as reference.

Legal had opportunity to review the RN advisories and provide change as determined. The below advisories are now available for the Board review and approval.

Clinical Learning Experiences Prelicensure Nursing Students: prelicensure add, no content change.

Dual Licensure: changes to Nursing Assistant and Home Health Aide requirements.

The RN as First Assistant to the Surgeon: update AORN Standards and Standardized Procedures

With Board approval, the following advisories will be posted to the BRN website:

- Clinical Learning Experiences Prelicensure Nursing Students
- Dual Licensure
- The RN as the First Assistant to the Surgeon
- Nurse Practitioners will not act as a Scrub Nurse

MSC: Graves/Ware motion to accept changes to advisories, and addition of Nurse Practitioners will not act as a Scrub Nurse. 6/0/0 Darlene Bradley was not in attendance to vote, as Board Member left at 5:30pm.

Public comment:
Meg Cohen, CANP

14.3 Nurse Practitioners Practice Advisories

Janette Wackerly presented this report

Nurse Practitioner advisories are available at www.rn.ca.gov. When using the BRN home page, locate the cursor on the left hand side of the page, titled “Practice Information”. Then locate the cursor over “Nurse Practitioner” for a listing of advisories.

The liaison to the Practice Committee, with assistance from the board staff, has been updating BRN advisories utilizing the California Nursing Practice Act with Regulations and Related Statutes 2011 edition, and California Law, found at www.leginfo.ca.gov, as resources. Published nursing textbooks and nursing periodical may also be used as reference.

Legal had opportunity to review the Nurse Practitioner Advisories and provide changes as determined. The below advisories are now available for the board review and

acceptance. The Practice Committee presents the updated advisories. Attached documents include the changes identified by watermark draft and watermark deleted.

Frequently Asked Question About Nurse Practitioner Practice: updating content.
Medi-Cal Billing: Certified Nurse Practitioner, Nationally Certified in a Specialty, no change
Nurse Practitioner Schedule II Controlled Substance Education Requirement Prior to Applying to the DEA for Schedule II Authority. No changes.

With Board approval, the following advisories will be posted to the BRN website:

- Frequently Asked Questions About Nurse Practitioner Practice
- Medi-Cal Billing: Certified Nurse Practitioner, Nationally Certified in a Specialty
- Nurse Practitioner Schedule II Controlled Substance Education Requirement Prior to Applying to the DEA for Schedule II Authority.

MSC: Toder/Graves motion to accept changes to advisories 6/0/0.

15.0 Public Comment for Items Not on the Agenda

Meg Cohen, CANP

16.0 1:00 pm - Hearing on Proposed Regulations and Possible Action

D. Chang, DCA Legal Counsel, called meeting to order at 2:53 pm. Meeting adjourned at 3:28 pm.

16.1 16 CCR Section 1444.5, Uniform Standards Relating to Substance Abuse and Disciplinary Guidelines.

Public comment:

Trisha Hunter, ANA-C

Kelly Green, CNA

Barbara Blake, UNA

Jeannie King, SEIU Nurse Alliance of California

Brian Stiger, DCA Acting Director

J. Graves has requested the staff to compile all comments submitted to the Board regarding Section 1444.5. This will be reviewed for discussion at the upcoming September Board Meeting.

Meeting adjourned at 6:30 pm.

17.0 Closed Session

J. Graves, Board President, called the closed session meeting to order at 6:45 pm. The closed session adjourned at 7:30 pm.

Thursday, June 16, 2011

18.0 Call to Order

J. Graves, Board President, called the meeting to order at 9:06 am.

PRESENT: Jeannine Graves, MPA, BSN, RN, President
Darlene Bradley, MSN, CNS, RN
Judy L. Corless, BSN, RN
Dian Harrison, MSW
Erin Niemela
Catherine M. Toderro, PhD, MSN, RN
Kathrine M. Ware, MSN, ANP-C, RN

NOT PRESENT: Doug Hoffner, Vice President
Richard L. Rice

ALSO PRESENT: Louise Bailey, M.Ed., RN, Executive Officer
Don Chang, DCA Legal Council
Stacie Berumen, Enforcement Division Chief
Christina Sprigg, Administration Manager
Carol Stanford, Diversion Program Manager
Kim Ott, Legal Desk Analyst
Humberto Flores, Administrative Law Judge
Langston Edwards, Deputy Attorney General
Matthew King, Deputy Attorney General

19.0 Public Comment for Items Not on the Agenda

No public comment.

20.0 Disciplinary Matters

Reinstatements

Beverly Bolling
Louise Jones
Danielle Marella
Tracy Onat

Termination of Probation

Melinda Davis
Robin Jones
Christina Kress
Ingrid Roulston

Decisions are pending until final orders are received from the Administrative Law Judge with the Office of Administrative Law.

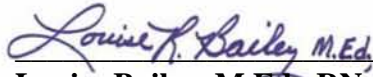
Meeting adjourned at 1:00 pm.

21.0 Closed Session

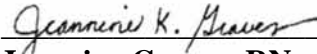
J. Graves, Board President, called the closed session meeting to order at 7:40 am. The closed session adjourned at 8:28 am. The closed session re-convened at 1:45 pm, closed session adjourned at 2:45 pm.

Disciplinary Matters

The Board will convene in **closed session** pursuant to Government Code Section 11126(c) (3) to deliberate on the above matters and other disciplinary matters including stipulations and proposed decisions.



Louise Bailey, M.Ed., RN
Executive Officer



Jeannine Graves, RN
Board President